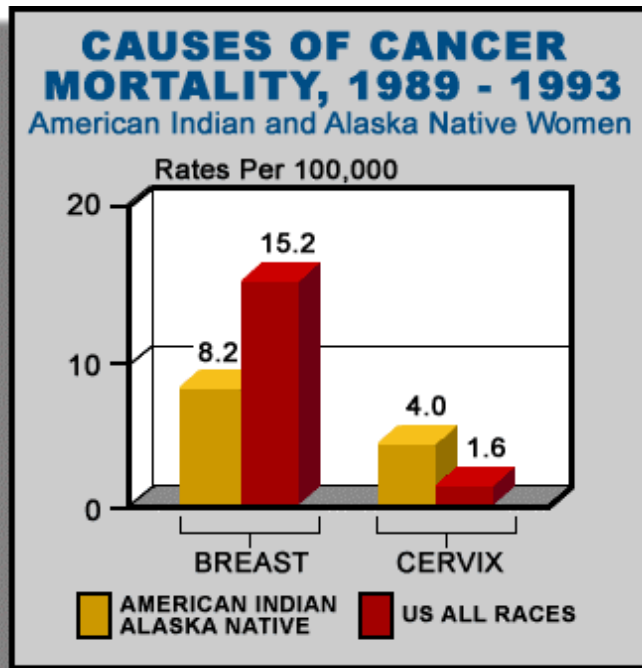


ISSUE

Research shows that women have a major influence on the health of their family and communities, most notably by role-modeling good health practices and making positive behavioral choices. American Indian and Alaska Native women's health status is generally below that of the general population - more a factor of access to health facilities and health providers than the quality of services available once the access barrier is removed.



BACKGROUND

American Indian and Alaska Native women's health is a key focus area for the Indian health system. The health needs of Indian women can be defined in two broad categories: reproductive health and non-reproductive health. Historically, the focus has been on the obstetrical needs of Indian women (maternal morbidity and mortality). Aggressive perinatal services have addressed this focus and yielded improvements. The need now is on improvements in community outreach services.

The concerns for Indian women can also be divided into two areas, health issues and social issues. Health issues of concern include the increasing incidence and prevalence of cardiovascular disease, accidents, diabetes, and cancer. Cervical cancer in some regional areas is above the rates in the U.S. general population. Social issues are smoking, poverty, education,

chemical dependency, mental health, and family violence. Specialized services are available at some Indian Health Service (IHS) and tribal health facilities, but in all areas assistance is limited.

SITUATION

Further improvements in Indian women's health status can be achieved through preventive services and increasing the surveillance and screening for diseases such as cervical cancer, obesity, high blood pressure, and hypercholesterolemia conditions that contribute to cardiovascular disease and diabetes. In addition, increasing opportunities for community education for healthy lifestyles to delay or prevent the onset of chronic disease will also yield long-term improvements in Indian women's health. Unfortunately aggressive social services support is not always available in abusive situations.

OPTIONS/PLANS

The IHS will continue to expand clinic hours to meet the needs of Indian women wherever feasible. The IHS is also encouraging the hiring of female providers to provide the necessary comprehensive women's health services. The agency will continue surveillance and screening partnerships with the Centers for Disease Control and Prevention and with the National Institutes of Health and expand those efforts with other federal and state agencies whenever possible. Efforts to coordinate supportive activities with Tribal, BIA, and other providers will continue at the local level.

ADDITIONAL INFORMATION

For referral to the appropriate spokesperson, contact the IHS Public Affairs Staff at 301-443-3593.